# APC News

## The Association of Prosthodontists of Canada

#### President's Message



Dr. Michael S. Moscovitch

## A Passion for Excellence in Practice and Politics

I am acceding to the presidency of the APC at a time when our organization is successfully taking advantage of opportunities to promote the importance of prosthodontics to the public and the dental profession.

I would like to thank our past presidents, executive officers, councillors, committee members and editors for their genuine efforts in advancing our association to its present level. I am honoured to follow in their footsteps.

The title of my address alludes to the attitude that I have observed in my prosthodontic mentors, teachers and colleagues in their daily pursuits. This passion is what drives our specialty to excel. There is no doubt that many of our members are amongst the most active and influential people in our profession locally, nationally and internationally. I would like to specifically recognize the unselfish contributions of our past president, Dr. Donald Reikie, in successfully moving the association through another challenging year of activities, which culminated with the recent annual meeting of the APC in Orlando, Florida, in conjunction with the American College of Prosthodontists. The meeting was

well attended by our members. I am confident that all APC delegates were rewarded with a valuable opportunity to learn and interact with our American colleagues.

I would also like to thank our many members who pursue our political agenda at the national and provincial levels to promote and improve the quality of prosthodontic care delivered to the Canadian public.

The practice of prosthodontics has historically not been well understood by the general dental profession. It is well known that there are many areas of crossover in the delivery of restorative treatment between general dentists and prosthodontists. It is my opinion that our patients' needs would be better served by closer collaboration between these 2 groups. I feel that general dentists should make a stronger effort to consult with prosthodontists in their communities to increase the treatment options of their patients, in the same way that they now consult with other dental specialties. This approach could result in a greater appreciation, by our patients, of the expertise that is now available in the fields of implant, esthetic and reconstructive dentistry, and of the work done by both the consulting specialist and the general dentist. Patients who have a positive experience with restorative dental treatment will be more likely to encourage their families, friends and colleagues to seek dental treatment. Invariably their general dentist will feel the effect of increased referrals to his or her practice. This can only result in a winwin situation for everyone involved.

I ask all of our dental colleagues, both generalists and specialists, to establish greater lines of communication with their local prosthodontists so that our patients may be able to benefit from all that modern dentistry has to offer.

The next annual meeting of the APC will be a joint meeting with International College the of Prosthodontists (ICP) and will be held in Halifax, Nova Scotia, from July 9 to 13, 2003. Information about this meeting can be obtained by contacting our national office at (416) 750-1752 or by e-mail at administrator@prosthodontics.ca. Please make every effort to attend this exciting meeting in one of Canada's most beautiful locations. You are all invited.

In closing, I would like to encourage all dentists to exercise their passion to promote prosthodontics to their patients, colleagues and community. Feel free to contact me with any of your concerns.

Michael S. Moscovitch, DDS Prosthodontist

## Editor's Message



Dr. Sebastian Saba

## Predictable Prosthetic Dentistry

Predictable prosthetic dentistry faces many challenges. Some prosthetic treatments have inherent clinical limitations. It is important to identify and take into account these limitations before any final treatment decisions are made. Some limitations relate to the techniques we use, others involve the prosthetic designs used to esthetically replace teeth and soft tissue defects. Medical complications provide another set of challenges. Indeed, a patient's medical condition must be under control to improve any prognosis. Finally, remember that your patients' expectations may actually curtail your chances of prosthetic success, as it seems that teeth are never white enough for some patients.

Conventional implant techniques are designed to be used under ideal clinical conditions. When soft-tissue morphology is a critical factor, the conventional technique needs to be modified accordingly. We include in this special edition an article describing a modified impression technique to record soft-tissue morphology.

The replacement of missing teeth sometimes necessitates a prosthetic design that includes both a gingival component and a tooth-coloured component. Such a design comes in a variety of formats — a review article of different gingival replacement prostheses is included in this edition.

One factor that may contribute to premature tooth loss is acid reflux. Recognizing the signs and symptoms of acid reflux is critical to controlling the disorder. If undetected, this condition can lead to the premature failure of the prosthodontic treatment. One of this month's articles discusses the effect of acid reflux on esophageal and dental health.

One of the greatest challenges for any dentist is to treat a patient who needs a removable prosthesis. Dental school may teach us about the basic techniques for this type of treatment, but fails to explain how to deal with patient expectations. Lack of patient satisfaction does not imply poor prosthetic technique, but it may imply a misinterpretation of the patient's needs or demands. The need to develop a diagnostic approach in the selection of prosthetic options that best fits the patient's expectations is discussed in a 2-part article that also looks at the issue of predictable clinical outcomes.

Ah yes, the different shapes and forms of everyday prosthetic challenges!

Sebastian Saba, DDS Prosthodontist

## Interfaces in Prosthodontics International Symposium

## "On Biological and Social Interfaces in Prosthodontics"

## by Dr. Effrat Habsha

An international symposium "On Biological and Social Interfaces in Prosthodontics" was held in Toronto from November 3 to 6, 2002. The objective of the symposium was to provide an in-depth analysis of research on the biological and social interfaces that influence and determine clinical decision-making in prosthodontics. The invited participants, who consisted of both international and Canadian leading clinical and basic science researchers, were assigned to one of the following 4 study groups:

- 1. the interface between the prosthodontist and the patient
- 2. the host tissues/implant interface
- 3. fixed and removable prostheses and their interfaces with hard and soft oral tissues
- 4. the occlusal interface.

The participants presented concise literature reviews on topics generated by the co-chairs in each group. The objective of each presentation was to identify the following:

- what we know that is important;
- what we do not know that would be important to know;
- what research strategies would be highlighted to acquire what we needed to know; and

• what needs highlighting in educational programs and how will this information be delivered.

The synthesis of information from the symposium will ultimately be published in a supplement issue of the *International Journal of Prosthodontics*. Congratulations to honourary member **Dr. George Zarb**, symposium committee chair, and **Drs. Michael MacEntee** and **James Anderson**, for their leadership roles in the symposium.

## ICP/APC Annual General Meeting Halifax, Nova Scotia July 9–13, 2003

Halifax, capital of Nova Scotia, lies on a peninsula and is one of the world's largest deep-water harbours. This hilly city rises from the harbour and the historic central district to the upper ramparts of the Halifax Citadel, a star-shaped fortress that offers visitors splendid views of the city and waterfront. While in Halifax be sure to take in the Maritime Museum of the Atlantic and Pier 21 (ICP banquet site) — a national historic site that proudly showcases Canada's immigrant heritage. A drive to nearby Peggy's Cove, to see what must be the world's most photographed lighthouse, is also a must. The city's Public Gardens offer the finest original formal Victorian public garden in North America. Enjoy historic fountains and statuary, duck ponds and Sunday afternoon band concerts.

Halifax's downtown area is a bustling hub of commerce, education and culture. Sidewalk cafés create a lively international flavour. Vibrant shopping districts have something for even the most discriminating tastes. Halifax has a special flavour romantic, cultured and captivating. Founded in 1749, it is a friendly city with tree-lined streets, parks and green spaces that invite you to explore it. If this is your first visit to Nova Scotia, take some time to see the country. Link to Explore Nova Scotia

## APC News

(www.explore.gov.ns.ca) and see what's available! The ICP delegation will be taking its own mini tour to Lunenburg for its "Lobster Fest" on the docks where the famous schooner *Bluenose* was built.

## CONFERENCE PROGRAM

#### Wednesday, July 9th

3:00 p.m. – 6:00 p.m. Registration Reception

#### Thursday, July 10th

7:00 a.m. – 8:00 a.m. Registration

8:00 a.m. – 12:30 p.m. Focus Session I - Innovations in Prosthodontic Technologies Keynote Presentations/Panel Discussion

12:30 p.m. – 2:00 p.m. Conference Luncheon

2:00 p.m. – 5:00 p.m. Focus Session II - The Toronto Summit & International Program Guidelines Australia • Canada • Japan • Switzerland • United Kingdom • United States of America Keynote Presentations/Panel Discussion

5:00 p.m. Session Adjourns

6:30 p.m. – 8:30 p.m Welcome Reception

#### Friday, July 11th

8:30 a.m. - 12:00 p.m.

Concurrent Session I: Removable Partial Dentures vs. Fixed Partial Dentures vs. Implant-Supported Tooth Replacements

• Abstracts - Short Oral Presentations

8:30 a.m. – 12:00 p.m. Concurrent Session II: Implant Surgery by Prosthodontists

• Abstracts - Short Oral Presentations

12:00 p.m. Session Adjourns

2:00 p.m. – 4:00 p.m.Poster Presentations/Exhibit Reception

5:00 p.m. – 10:00 p.m. Lunenburg Tour and Lobster Dinner

#### Saturday, July 12th

8:30 a.m. – 12:00 p.m. Concurrent Session I : Geriatrics
Abstracts - Short Oral Presentations

8:30 a.m. – 12:00 p.m. Concurrent Session II : Occlusion, Oral Physiology, TMD

• Abstracts - Short Oral Presentations 12:00 p.m. Free Time for Lunch

1:30 p.m. – 5:00 p.m. Concurrent Session I : Maxillofacial Prosthodontics

• Abstracts - Short Oral Presentations

1:30 p.m. – 5:00 p.m. Concurrent Session II : Dental Materials

• Abstracts - Short Oral Presentations

5:00 pm Session Adjourns

7:00 p.m. – 9:00 p.m. ICP Banquet (Pier 21)

#### Sunday, July 13th

7:00 a.m. – 9:30 a.m. ICP Business Breakfast (members only)

9:30 a.m. – 12:00 p.m. Focus Session III - Current Controversies Keynote Presentations/Panel Discussion

12:00 p.m. Conference Adjourns

Conference program subject to change

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c/o Canadian Dental Association

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#### 2002–2003 APC EXECUTIVE COUNCIL

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## P R O V I N C I A L / R E G I O N A L P R E S I D E N T S

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## A P C P U B L I C A T I O N C O M M I T T E E

Editor, *Frontline* Effrat Habsha Editor, *Journal of APC* Sebastian Saba

#### APC COMMITTEE CHAIRS

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